PART B - FEE(S) TRANSMITTAL

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| \ | APIRO MORIN & C FTHE AMERICAS (6 | | I hereby certify the | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below. | | | | |
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| APPLICATION NO. | FILING DATE | | FIRST NAME | D INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | | |
| 09/731,280 | 12/06/2000 | Kazuo E | | Ebina | P/647-135 | 9092 | | |
| TITLE OF INVENTION: B | ROADCASTING CONTRO | OL SYSTEM AND | METHOD II | N ATM RING NETWORK | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FI | EE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | | |
| nonprovisional | NO | \$1400 | | \$300 | \$1700 | 03/30/2005 | | |
| EXAMINER | | ART UN | IT | CLASS-SUBCLASS | \neg | | | |
| TRAN, THIEN D | | 2665 | | 370-452000 | | | | |
| 1. Change of correspondence | e address or indication of "F | ee Address" (37 | 2. For pri | nting on the patent front page | e. list DICKSTEIN GUAR | 200 440000 | | |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is | | | | | |
| Number is required. | | | listed, no name will be printed. | | | | | |
| 3. ASSIGNEE.NAME AND | | | | | | | | |
| recordation as set forth in | 37 CFR 3.11. Completion | of this form is NOT | data wiii app Γa substitute | for filing an assignment. | 98292685 ¹ 32£W0182 ¹ 000001 | Schrift 188 been filed | | |
| (A) NAME OF ASSIGN | ration | RESIDENCE: (CITY and STATE ORICE(\$1504) 02 FC: 1504 03 FC: 8001 00 09 | | | | | | |
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| | | | Deposit Acc | ount Number | y charge the required fee(s), or extra c | credit any overpayment copy of this form). | | |
| Change in Entity Status a. Applicant claims SI | (from status indicated above MALL ENTITY status. See | | ☐ b. Applic | cant is no longer claiming SM | MALL ENTITY status. See 37 C | CFR 1.27(g)(2). | | |
| The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco | is requested to apply the Iss ublication Fee (if required) vords of the United States Page | re Fee and Publicat vill not be accepted int and Trademark | ion Fee (if ar I from anyon Office. | ny) or to re-apply any previous and any or to re-apply any previous and applicant; a second s | ously paid issue fee to the applicate registered attorney or agent; or t | ation identified above. he assignee or other part | | |
| Authorized Signature | Michael | · 1197 | een | | March 18 | , 2005 | | |
| Typed or printed name | Michael | J. 50 | chee | Negistrat | | 25 | | |
| This collection of informatio | n is required by 37 CFR 1.3 | 11. The information | n is required | to obtain or retain a benefit l | by the public which is to file (an | d by the USPTO to proc | | |

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| Effective on 12/08/2004. | Complete if Known | | | | | | | | | | |
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| Fees pursuant to the Consolidated Appropriations Act, 200 | Application Nur | | 09/731,280-Conf. #9092 | | | | | | | | |
| FEE TRANSMITT | Filing Date | | December 6, 2000 | | | | | | | | |
| • | First Named Inv | entor K | Kazuo Ebina | | | | | | | | |
| For FY 2005 | | Examiner Name T. D. Tran | | | | | | | | | |
| Applicant claims small entity status. See 37 CF | R 1.27 | Art Unit | 2665 | | | | | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1,7 | Attorney Docket No. Y0647.0135/P135 | | | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | | |
| Check X Credit Card Money Order None Other (please identify): | | | | | | | | | | | |
| Deposit Account Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP | | | | | | | | | | | |
| For the above-identified deposit account, t | For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below | | | | | | | | | | | |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION | | | | | | | | | | | |
| FILING FEES SEARCH FEES EXAMINATION FEES | | | | | | | | | | | |
| <u>Small En</u> <u>Application Type</u> <u>Fee (\$)</u> <u>Fee (\$</u> | | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees P | aid (\$) | | | | | |
| Utility 300 150 | 500 | 250 | 200 | 100 | | | | | | | |
| Design 200 100 | 100 | 50 | 130 | 65 | | | | | | | |
| Plant 200 100 | 300 | 150 | 160 | 80 | | | | | | | |
| Reissue 300 150 | 500 | 250 | 600 | 300 | | | | | | | |
| Provisional 200 100 | 0 | 0 | 0 | 0 | | | | | | | |
| 2. EXCESS CLAIM FEES | | | | | | Small Entity | | | | | |
| Fee (\$) Fee (\$) | | | | | | | | | | | |
| Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissu | ac) | | | | 50 200 | 25 100 | | | | | |
| Multiple dependent claims | cs) | | | | 360 | 180 | | | | | |
| | Eoo D | aid (\$) | Mii | Itinla Dananda | | 100 | | | | | |
| | | aiu (\$) | aid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) | | | | | | | | |
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| Indep. Claims | Fee P | aid (\$) | | | | - | | | | | |
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| 3. APPLICATION SIZE FEE | | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) × = | | | | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | | | | | |
| Non-English Specification, \$130 fee (no sma | all entity disco | ount) | | | . 5051 | 741 | | | | | |
| Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00 | | | | | | | | | | | |
| 1304 Publication fee for early, Voluntary, or normal 300.00 | | | | | | | | | | | |
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| SUBMITTED BY | | | | | | | | | | | |
| Signature McClosel - 1 | Scheol | Registration No. (Attorney/Agent) | 34,425 | Telephone | elephone (212) 896-5472 | | | | | | |
| Name (Print/Type) Michael J. Scheer Date March 18, 2005 | | | | | | | | | | | |